PTC/SB/06 (08-03)

Approved for use through 7/31/2008. ONB 0681-0032

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PATENT APPLICATION FEE DETERMINATION RECORD Application or Product Number.									
Substitute for Form PTO-875							10/16/4/050		
[(CLAIMS AS	FILED.	- PART I	•					
(Column 1)				(Cotumn 2)		ENTITY	OR		R THAN ENTITY
FOR NUMBER FILE		RALED	NUMBER EXTRA		RATE	FEE			T
BASIC FEE (37 CFR 1.16(a))					1	375		RATE	FEE
ST. CFR 1.16(c) 39 colour		minus 20	20 = - 9			101	OR		<u> </u>
INDEPENDENT CLAIMS (37 CFR 1.18(b))	 ' ' ' 				X	171.00	OR	X 8 = .	
				× = 84 -	252.00	OR	× \$		
MULTIPLE DEPENDENT	+8		OR	+: •					
" If the difference in column 1 is less than zero, enter "O" in column 2.					TOTAL	798,00	p jo r	TOTAL	
CLAIMS AS AMENDED - PART II									<u> </u>
"" TO COMINITATED - PART II									
. (Column 1)		. (Column 2)	(Column 3)	SMALL	ENTITY	OR		THAN ENTITY
<u> </u>	CLAIMS EMAINING		HIGHEST NUMBER	PRESENT.	RATE	ADOI-			
	AFTER MENDMENT		PREVIOUSLY PAID FOR	EXTRA		TIONAL		RATE	ADDI- TIONAL
Total .	39	Minus	30	. 0	X				FEE
Z Independent •	6	Minus	** 40	• 27			OR	× 8	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1660)					X 8	- \ -	OR	X 8	
(37 C-R 1.16(d))					+s		OR	+8	
•	•	. •		. :	ADD'L FEE	<u> </u>	OR	TOTAL ADD'L FEE	
	Column 1)		(Cotumn 2)	(Cotumn 3)		-			
<u>0</u>	CLAIMS EMAINING	ľ	HIGHEST MUMBER	PRESENT	RATE	ADDI-		RATE	
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Total AA Total (#7 off 1.5%) Independent (#7 off 1.5%)	36	Minus	- 39	88	x 8 =	<u></u>			FEE .
Z independent * profe Lase)	5	Minus	6	-8		1	OR ·	X 8e.	 -
THREST PRESENTATION OF MILETRIE CRESIDENCE AND ADDRESS									
+s = TOTAL							OR	+s -	·
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	olumn 1)		(Column 2)	(Column 3)	·	•	•		
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E 1/23/06 AM	AFTER ENDMENT		PREVIOUSLY PAID FOR	EXTRA		TIONAL FEE		ivite	TIONAL
C CFR 1.(0k))	3/2	Minus '	. 39	- Ø.	xs	\ .			FEE
Total Cornection of the Cornec	5	Minus	··· (a	-0		\ 	OR.	× 5	
No second	X \$	-	OR	x \$					
≪ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) +8 □ OR +5 □ TOTAL									
· · · · · · · · · · · · · · · · · · ·								ADD'L FEE	·.]
			u turo coa <i>c</i> e l	. laca (baa 86 a	_4		•	•	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20". The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".									

The Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to tile (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including generating, and submitting the completed application for mot the USPTO. Time will vary depending upon the individual case. Any comments on the emount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the CNef information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerca, P.O. Box 1450, Alexandria, VA 22313-1450, OO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.